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Attorney Docket No.: VPI/02-110 US



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/609,147
Confirmation No.: 6705
Filing Date: June 27, 2003
Examiner: Paul V. Ward
Group Art Unit: 1614
Applicants: Knegt et al.
For: CASPASE INHIBITORS AND USES THEREOF

Certificate of Mailing Under 37 CFR §1.8

I hereby certify that this correspondence and any documents referred to as attached hereto are being deposited with the U.S. Postal Service with sufficient postage as Express Mail in an envelope addressed to Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on September 5, 2006.

Lisa M. Romano
Typed or Printed Name
Lisa M. Romano
Signature

September 5, 2006
Cambridge, Massachusetts

Mail Stop: RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☒ Request for Continued Examination (RCE); to be filed in the above-identified patent application; ☐ a Notice of Appeal; ☐ a substitute Specification; ☐ a Declaration; ☐ a Supplemental Declaration; ☐ a Power of Attorney; ☐ an Associate Power of Attorney; ☐ formal drawings; ☐ Notice of Appeal; ☐ Appeal Brief;

Applicant: Knegtel et al.	
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FEE FOR ADDITIONAL CLAIMS

☒ A fee for additional claims is not required.

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The additional fee has been calculated as shown below:

CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	-	* =	X \$ 50	= \$ 0
INDEPENDENT CLAIMS	-	** =	X \$200	= \$ 0
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM		+	\$360	= \$
* If less than 20, insert 20.		TOTAL		\$ <u>0</u>
** If less than 3, insert 3.				

☐ A check in the amount of \$__ in payment of the filing fee is transmitted herewith.

☐ Please charge \$__ to Deposit Account No. 50-0725 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

☒ The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 50-0725. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE

☐ The following extension is applicable to the Response filed herewith; ☐ \$120.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); ☐ \$450.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); ☐ \$1,020.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); ☐ \$1,590.00 extension fee for response within fourth month

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pursuant to 37 C.F.R. § 1.136(a); ☐ \$2,160.00 within fifth month pursuant to 37 C.F.R. § 1.136(a).

- ☐ A check in the amount of ☐ \$120.00; ☐ \$450.00; ☐ \$1,020.00; ☐ \$1,590.00; ☐ \$2,160.00 in payment of the extension fee is transmitted herewith.
- ☐ Please charge the extension fee in the amount of ☐ \$120.00; ☐ \$450.00; ☐ \$1,020.00; ☐ \$1,590.00; ☐ \$2,160.00 to Deposit Account No. 50-0725. A duplicate copy of this transmittal letter is transmitted herewith.
- ☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 50-0725. A duplicate copy of this transmittal letter is transmitted herewith.

MISCELLANEOUS FEES

- ☒ Please charge \$790.00 to Deposit Account No. 50-0725 in payment of the RCE (Request for Continued Examination) and filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,



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